

#### STATE OF NEW HAMPSHIRE 2017 Statement of Income and Expenses for LOBBYISTS

### **RECEIVED** (RSA Chapter 15)

APR 18 2017

PLEASE PRINT

NEW HAMPSHIRE STATE

I. Name of Lobbyist(s) Debra	Vanderbeek, Rober	t Clegg, Periklis Karoutas, L	eann Moccia
II. Name of lobbyist's partnership, firm	or corporation, if a	ny:	
Legislative Solutions, L	.L.C.		
(Name of partnership, firm	or corporation)		
P.O. Box 10724	Bedford	NH	03110
Business Address: (Street)	(Town/City)	(State)	(Zip Code)
( ) 603-986-9145 (	)	<sub>e-mail</sub> dbeek@a	ol.com
(Telephone)	(Fax	)	
III. This statement covers: (Choose one			ay file a separate report
reportable expense transactions which	are not attributable	to any one client).	
☐ All reportable transactions occurring i	n the months prior to	the reporting date relative to the	he following client:
Now Hampshir	. Coalition Against	the Death Beanalty	
	e Coalition Against to to as it appears on the Lo	obbyist Registration Form)	
OR	to appears on me be	<b>y </b>	
All reportable transactions by the lobb unrelated to any particular client.	yist (including the lob	obyist's family), or the lobbyin	g firm listed below which
IV. Date of Report April 26, 2017 Reports cover: activity from date of regis		July 26, 2017 activity from 4/1/17 to 6/30/17	7
October 25, 201' activity from 7/1/17 to	7 🗆	January 31, 2018 activity from 10/1/17 to 12/31	
V. There have been no fees received If this box is checked, complete just this for Concord, NH 03301.			
VI. Check if additional reports are atta	ched:		
If you have received fees or made exp		file Addendum A– Fees and E	Expenses
☐ If you have paid an honorarium or rei Expense Reimbursement			
☐ If you, your firm, or your family has	made political contrib	outions, you must file Addend	um C- Political Contribut
Sworn Statement/Affirmation by Lobb I have read RSA 15, RSA 15-B, RSA 14- and complete to the best of my knowledg (Signature of lobbyist)	Cand RSA 664 and l	•	foregoing information is to the state of the
Debra Vanderbeek			
(Print Name of lobbyist)			

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#### STATE OF NEW HAMPSHIRE

#### Lobbyists Fees and Expenses Addendum A



(RSA Chapter 15:6)

I. Name of Lobbyist(s) Debra Vanderbeek, Robert Clegg, Periklis Karout	as, Leann Moccia
II. Name of lobbyist's partnership, firm or corporation, if any:	
Legislative Solutions, L.L.C.	
(Name of partnership, firm or corporation)	
III. Name of Client NH Coalition Against the Death Penalty	Date April 18, 2017
IV. Fees Received Indicate the gross amount of all fees received from the client identified above to lobbying, including fees for services such as public advocacy, government including research, monitoring legislation, and related legal work. The groreduced by any expenses:	relations, or public relations services
a) Total of all fees received in this reporting period	a) \$ 9000.00
b) Total of all fees received this calendar year, prior to this reporting period (This should equal the total of all prior monthly reports for this calendar year).	b) \$ <u>0</u>
c) Total of all fees received to date (Add lines a and b)	c) \$ <u>9000.00</u>
d) Indicate the amount of any such fees that are due, but have not yet been paid	d) \$ 0
V. Expenses: Lobbyist(s)/Lobbying partnerships, firms, or corporations are required to rep fees. Separate reports are to be filed for expenditures made relative to each of the lobbyist(s)/firm that are unrelated to any one client a separate report of the Expenses are to be reported in one of three categories of expenses: (a) the during the reporting period for salaries, benefits, support staff, and office eximitividual expenses where the expenditure was of \$25.00 or less (for example lunch where the cost was \$25.00 or less, purchase of a pen with a value of less being lobbied, purchase of a ceremonial object given to a person being lobbied (c) an itemized statement of each individual expenditure made during this report any purpose not covered by (a) (for example: purchase of a meal with value ceremonial object to be given to the subject of lobbying with a value greater restaurant expenses for a legislative reception). Expenses for honorariums, contributions will be reported on separate addendums and should not be reported.	client and if expenditures are made by may be filed for the lobbyist(s)/firm aggregate total of all expenses paid expenses; (b) the aggregate total of all le: meals purchased during a business st than \$10 that is given to the person ad with a value of \$25.00 or less); and orting period of greater than \$25.00 for the of greater than \$25, purchase of a ter than \$25, but not greater than \$50, expense reimbursement, or politica
<ul><li>a) Total aggregate expenses for this reporting period for salaries, benefits, support staff, and office expenses, related directly or indirectly to lobbying.</li><li>b) Total aggregate of expenditures during this reporting period, not reported</li></ul>	a) \$ 9000.00
in a), of \$25 or less.	b) \$ <u>0</u>
c) Total of all itemized expenditures reported in detail in section VI.	c) \$ <u>0</u>

d) Total expenses for this reporting period (Add lines a, b and c)	d) \$ 9000.00
e) Total of expenses paid this calendar year, prior to this reporting period (This should be the amount on line f of addendum A for last month's report)	e) \$ <u>0</u>
f) Total of all expenses year to date	f) \$ 9000.00
VI. Other Expenses: Provide the following detail for all expenditures of more than \$25 made from be period, including by whom paid or to whom charged.	obbying fees during this reporting
Paid to:	Amount:
	\$
	\$
	\$
	\$
	\$
	\$
Sworn Statement/Affirmation by Lobbyist	
I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affirm is true and complete to the best of my knowledge and belief.	m that the foregoing information
(Signature of labbriet)	April 18, 2017
(Signature of lobbyist)	(Date)
Debra Vanderbeek	
(Print Name of lobbyist)	

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## State of New Hampshire Signature Form for Associated Lobbyist RSA Chapter 15

Use this form to swear or affirm the truth and completeness of Income and Expense Statements and related Addendums.

**Robert Clegg** 

(Print Name of lobbyist)

Sworn Statement/Affirmation by Lobbyist Statement of Income and Expenses for: **Legislative Solutions** Name of Lobbying partnership, firm, or corporation: Name of Client (leave blank if Statement is for the partnership, firm, or corporation and not related to any particular client): Date of Report (check one): April 26, 2017 🕱 July 26, 2017 □ October 25, 2017 □ January 31, 2018 □ I have read RSA 15, RSA 15-B, RSA 664, the Statement of Income and Expenses described above, and the following Addendums submitted with that Statement (insert the number of Addendum forms being submitted): Addendum A(s). Addendum B(s). Addendum C(s). I hereby swear or affirm that the foregoing information on the Statement and each Addendum is true and complete to the best of my knowledge and belief. April 18, 2017

#### State of New Hampshire Signature Form for Associated Lobbyist RSA Chapter 15

Use this form to swear or affirm the truth and completeness of Income and Expense Statements and related Addendums.

Sworn Statement/Affirmation by Lobbyist Statement of Income and Expenses for:

Name of Lobbying partnership, firm, or corporation: Legislative Solutions  Name of Client (leave blank if Statement is for the partnership, firm, or corporation and not related to any particular client):  Att Court of Rand Statement Statement is for the partnership.
Date of Report (check one):
April 26, 2017
I have read RSA 15, RSA 15-B, RSA 664, the Statement of Income and Expenses described above, and the following Addendums submitted with that Statement (insert the number of Addendum forms being submitted):
Addendum A(s).
Addendum B(s).
Addendum C(s).
I hereby swear or affirm that the foregoing information on the Statement and each Addendum is true and complete to the best of my knowledge and belief.  (Signature of lobbyist)  (Date)
Periklis Karoutas
(Print Name of lobbyist)

#### State of New Hampshire Signature Form for Associated Lobbyist RSA Chapter 15

Use this form to swear or affirm the truth and completeness of Income and Expense Statements and related Addendums.

Sworn Statement/Affirmation by Lobbyis	st
Statement of Income and Expenses for:	

-
Name of Lobbying partnership, firm, or corporation: Legislative Solutions
Name of Client (leave blank if Statement is for the partnership, firm, or corporation and not related to any particular client):  [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [
Date of Report (check one):
April 26, 2017 ☑ July 26, 2017 □ October 25, 2017 □ January 31, 2018 □
I have read RSA 15, RSA 15-B, RSA 664, the Statement of Income and Expenses described above, and the following Addendums submitted with that Statement (insert the number of Addendum forms being submitted):
Addendum A(s).
Addendum B(s).
Addendum C(s).
I hereby swear or affirm that the foregoing information on the Statement and each Addendum is true and complete to the best of my knowledge and belief.    April   8   3   17   (Date)   (Date)
Leann Moccia
(Print Name of lobbyist)